


Planning the Program: Meal Time Regulations and Recordkeeping





This training is part of a series of online trainings designed for experienced sponsors of the Summer Food Service Program in Kentucky. Sponsors who choose to receive their training via the online modules are responsible for adhering to the information presented in this training. Please address all questions to the State Agency.

SFSP Materials

The Summer Food Service Program
Summer Food Rocks!

2015 Administrative Guidance for
Sponsors

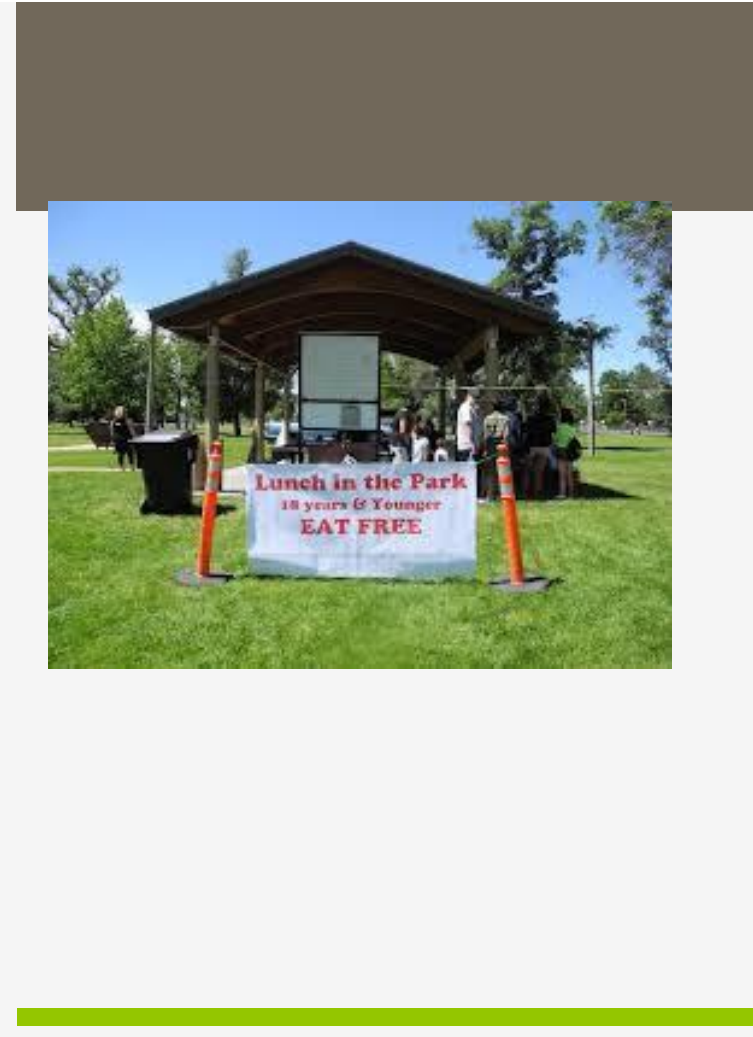


United States Department of Agriculture
Food and Nutrition Service

Planning the Program

Meal Time Basics

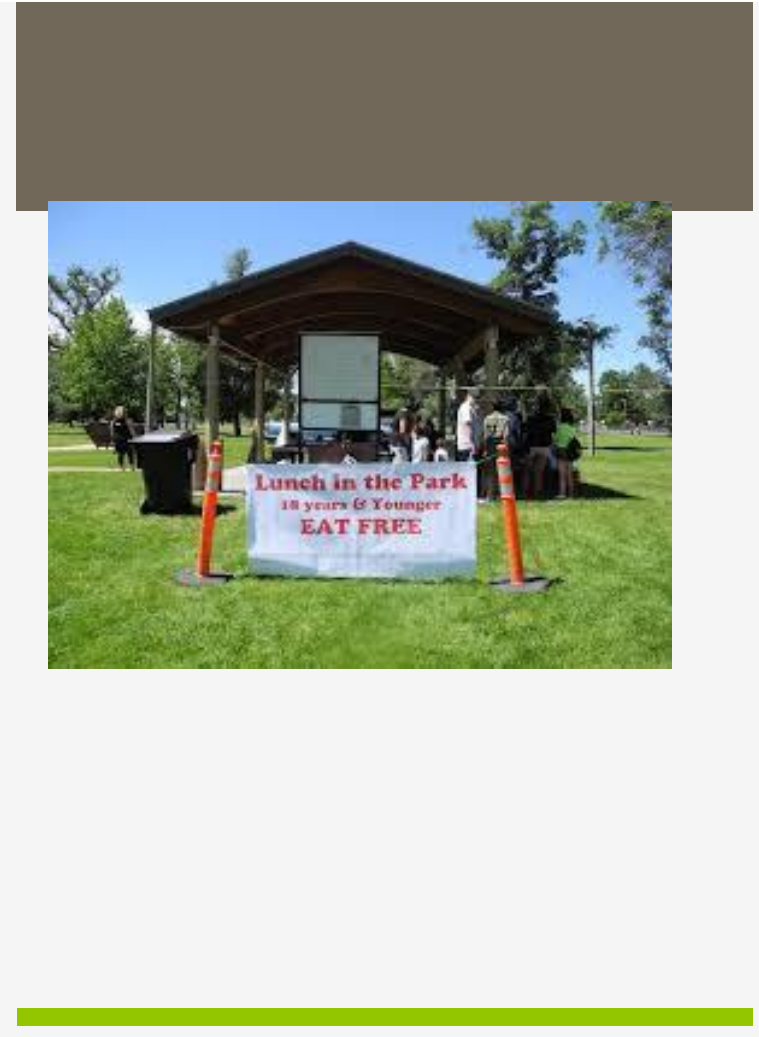
- Requirements at the meal site
- Recordkeeping at the site
- Field Trips
- Accommodating Children with Special Dietary Needs



Planning the Program

Meal Time Basics

Requirements at the
meal site



Signage

- Make sure your sites have clear signage. Not only does it let your participants know where your site is located, it also helps them to feel welcome to your site!



Congregate Feeding

It is a requirement that everyone eat together in the same space at the same time. A meal that is taken from the meal site can not be claimed for reimbursement.

Congregate Feeding Waiver:

Demonstration Project for Non-Congregate Feeding at Outdoor Sites Experiencing Excessive Heat

- Designate your Intent for the SITE to Participate in the site application in CNIPS.

Site Operation

33. Indicate your system for serving meals to attending children:

- ☐ Cafeteria Style
- ☒ Unitized meal
- ☐ Family Style (for Closed Enrolled and Camp sites only)
- ☐ Other (provide explanation)

34. Will this site utilize offer vs. serve?

☐ Yes ☐ No

35. Describe the method used for making adjustments in the daily number of meals delivered in accordance with the number of children attending:

Site sponsor will call in attendance and meals needed daily to the Sponsor site.

36. Is this a mobile site?

☐ Yes ☒ No

Stop
Name

Street,
City, Zip

Multi-
Family

Service Days

S M T W T F S
No ☐ ☐ ☐ ☐ ☐ ☐ ☐

Meal Service
Times

Qualifying
Data

[Add Stop](#)

37. Indicate how the site supervisor will communicate the number of meals that will be needed for the following day:

Site Staff will contact the Sponsor to order meals

38. Are you requesting a waiver for the First Week Site Visit?

☐ Yes ☐ No

39. Are you requesting that this Site to be included in the waiver for non-congregate feeding due to excessive heat?

☐ Yes ☐ No


Congregate Feeding Waiver:

Demonstration Project for Non-Congregate Feeding at Outdoor Sites Experiencing Excessive Heat

- Only available to sites without alternative temperature controlled eating areas.
- First Meals Only. (No second meals can be claimed.)
- -Meals are not available for any adults or, for any children who do not physically come to the meal site.
- Is only applicable for days when the National Weather Service has indicated a Heat Advisory
- Sponsors must submit dates of non-congregate service and number of meals served with their claim each month.

Other Meal Service Requirements:

- A sharing table may be designated for whole items that children choose not to eat, as long as the practice is in compliance with local and State health and safety codes.
- Even though the meal must be eaten on site, one fruit, vegetable, **or** grain item, that is not eaten may be taken off site by the participant. This practice is at the discretion of the sponsor. This may not be possible or practical at some sites.
- There are no time restrictions for meals, nor is there any time maximums or minimums for the duration of the meal service. Sponsors must, however, always have meal times preapproved before any meals can be eligible for reimbursement. Sponsors must also adhere to approved times.



-Younger Children 1-6 may be served a small amount of each component, and older children 12-18 may be served a larger amount of each component!

All participants must be served a first meal before second meals are served out. (*Only a percentage of second meals are eligible for reimbursement.*) Sponsors are not required to serve second meals.

Leftovers may be kept and served the following days IF they have not yet been served and they have held at the proper temperature.

What about Adult Meals?

- Adult Meals are NEVER Claimed for Reimbursement.
- Meals for PROGRAM Adults may be paid for through SFSP funds. Program adults are those adults who directly work with the program. Cooks, delivery drivers, and site supervisors are examples of program adults.
- Meals for NON PROGRAM Adults must be paid for by the Adults, or through another fund besides SFSP. Parents and community members who do not work with the SFSP program directly are examples of Non-Program Adults.

Quiz

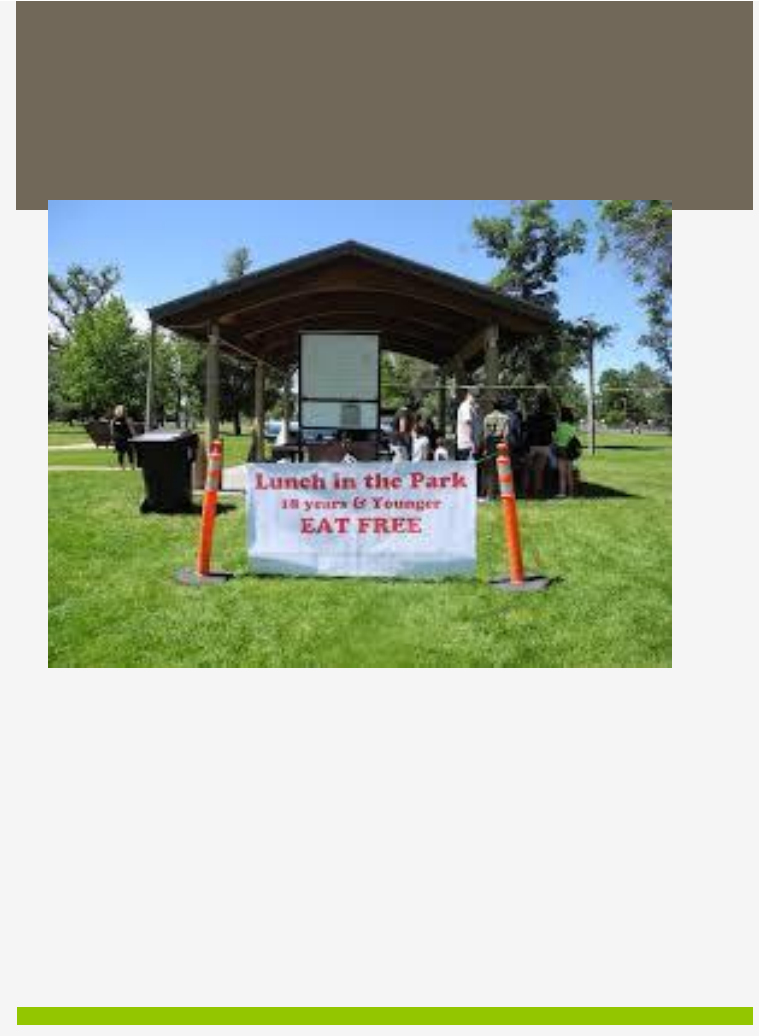
True or False: A participant may take one fruit, vegetable, or grain item from the sharing table off site with them when they leave the congregate meal site.

TRUE! If the sponsor allows for the policy for one fruit, vegetable or grain item to be taken from the site by a participant, it can either be their own item, or one that they pick up from the sharing table!

Planning the Program

Meal Time Basics

-Recordkeeping
at the Site



Delivery Tickets

One Delivery Ticket is completed each day for each meal for any satellite-prep site. (Sites that have meals prepared “off-site.”)

KY SFSP Delivery Receipt	
Sponsor	Meal (circle) B L S Sn
Date _____	Name of Site _____
Name of Preparation Facility _____	
Number of Meals Ordered and Prepared _____	
Food Production Facility Signature _____	
Number of Meals Delivered _____	
Time of Delivery _____	
Does the food at delivery time appear to be kept at an acceptable temperature? <u>yes</u> <u>no</u>	
<u>Comments</u> _____	
Signature of Person Receiving Meals at the Site _____	

Let's Look Closer!

KY SFSP Delivery Receipt

Sponsor Harrod County Meal (circle) B (L) S Sn

Date July 1, 2015 Name of Site Pine Tree Park

Name of Preparation Facility Harrod Elementary

Number of Meals Ordered and Prepared 75

Food Production Facility Signature Kathryn Sager

Number of Meals Delivered 75

Time of Delivery 10:45

Does the food at delivery time appear to be kept at an acceptable temperature? X yes no

Comments Kids love this meal!

Signature of Person Receiving Meals at the Site Susie Supervisor

Daily Meal Count Form for Open and Closed Enrolled Sites

- A Count of Meals must be Taken **at the Time of the Meal Service.**
- Use the Daily Meal Count sheet found on our SFSP KY website to ensure all necessary information is properly documented each day.
- Daily meal count forms should be turned into the sponsor at least once a week.

DAILY MEAL COUNT FORM																			
Site Name:										Meal Type (circle): B L SN SU									
Address:										Telephone:									
Supervisor's Name:										Delivery Time: Date:									
Meals received/prepared _____ + Meals available from previous day _____ = _____ (Total meals available) [1]																			
First Meals Served to Children (cross off number as each child receives a meal):																			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140
141	142	143	144	145	146	147	148	149	150	Total First Meals +					[2]				
Second meals served to children:																			
1	2	3	4	5	6	7	8	9	10	Total Second Meals +					[3]				
Meals served to Program adults:																			
1	2	3	4	5	6	7	8	9	10	Total Program Adult Meals +					[4]				
Meals served to non-Program adults:																			
1	2	3	4	5	6	7	8	9	10	Total non-Program Adult Meals +					[5]				
TOTAL MEALS SERVED =															[6]				
Total damaged/incomplete/other non-reimbursable meals +															[7]				
Total leftover meals +															[8]				
Total of items: [6] □+ [7] + [8] □= [9] (Item [9] should be equal to item [1])																			
Number of additional children requesting a meal after all available meals were served:																			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15					
By signing below, I certify that the above information is true and accurate:																			
Signature _____										Date _____									

Let's look at what needs to be documented.

DAILY MEAL COUNT FORM																																																																																																																																																																	
Site Name: <u>Harrod Elem. School</u>	Meal Type (circle): <u>(B)</u> L SN SU																																																																																																																																																																
Address: <u>300 Harrod St. Oaktown, KY</u>	Telephone: <u>123-456-7891</u>																																																																																																																																																																
Supervisor's Name: <u>Cyndi Lee</u>	Delivery Time: <u>NA</u> Date: <u>July 1, 2015</u>																																																																																																																																																																
Meals received/prepared <u>200</u> + Meals available from previous day <u>10</u> = <u>210</u> (Total meals available) [1]																																																																																																																																																																	
First Meals Served to Children (cross off number as each child receives a meal):																																																																																																																																																																	
<table border="0"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> <tr><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td><td>39</td><td>40</td></tr> <tr><td>41</td><td>42</td><td>43</td><td>44</td><td>45</td><td>46</td><td>47</td><td>48</td><td>49</td><td>50</td><td>51</td><td>52</td><td>53</td><td>54</td><td>55</td><td>56</td><td>57</td><td>58</td><td>59</td><td>60</td></tr> <tr><td>61</td><td>62</td><td>63</td><td>64</td><td>65</td><td>66</td><td>67</td><td>68</td><td>69</td><td>70</td><td>71</td><td>72</td><td>73</td><td>74</td><td>75</td><td>76</td><td>77</td><td>78</td><td>79</td><td>80</td></tr> <tr><td>81</td><td>82</td><td>83</td><td>84</td><td>85</td><td>86</td><td>87</td><td>88</td><td>89</td><td>90</td><td>91</td><td>92</td><td>93</td><td>94</td><td>95</td><td>96</td><td>97</td><td>98</td><td>99</td><td>100</td></tr> <tr><td>101</td><td>102</td><td>103</td><td>104</td><td>105</td><td>106</td><td>107</td><td>108</td><td>109</td><td>110</td><td>111</td><td>112</td><td>113</td><td>114</td><td>115</td><td>116</td><td>117</td><td>118</td><td>119</td><td>120</td></tr> <tr><td>121</td><td>122</td><td>123</td><td>124</td><td>125</td><td>126</td><td>127</td><td>128</td><td>129</td><td>130</td><td>131</td><td>132</td><td>133</td><td>134</td><td>135</td><td>136</td><td>137</td><td>138</td><td>139</td><td>140</td></tr> <tr><td>141</td><td>142</td><td>143</td><td>144</td><td>145</td><td>146</td><td>147</td><td>148</td><td>149</td><td>150</td><td colspan="10"></td></tr> </table>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150										
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20																																																																																																																																														
21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40																																																																																																																																														
41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60																																																																																																																																														
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80																																																																																																																																														
81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100																																																																																																																																														
101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120																																																																																																																																														
121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140																																																																																																																																														
141	142	143	144	145	146	147	148	149	150																																																																																																																																																								
Total First Meals + <u>Page 2</u> [2]																																																																																																																																																																	
Second meals served to children:																																																																																																																																																																	
<table border="0"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> </table>		1	2	3	4	5	6	7	8	9	10																																																																																																																																																						
1	2	3	4	5	6	7	8	9	10																																																																																																																																																								
Total Second Meals + <u>Page 2</u> [3]																																																																																																																																																																	
Meals served to Program adults:																																																																																																																																																																	
<table border="0"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> </table>		1	2	3	4	5	6	7	8	9	10																																																																																																																																																						
1	2	3	4	5	6	7	8	9	10																																																																																																																																																								
Total Program Adult Meals + <u>Page 2</u> [4]																																																																																																																																																																	
Meals served to non-Program adults:																																																																																																																																																																	
<table border="0"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> </table>		1	2	3	4	5	6	7	8	9	10																																																																																																																																																						
1	2	3	4	5	6	7	8	9	10																																																																																																																																																								
Total non-Program Adult Meals + <u>Page 2</u> [5]																																																																																																																																																																	
TOTAL MEALS SERVED = <u>Page 2</u> [6]																																																																																																																																																																	
Total damaged/incomplete/other non-reimbursable meals + [7]																																																																																																																																																																	
Total leftover meals + [8]																																																																																																																																																																	
Total of items: [6] □+ [7] + [8] □= [9] (Item [9] should be equal to item [1] on the front side of the page) <u>(see page 2) 210</u>																																																																																																																																																																	
Number of additional children requesting a meal after all available meals were served:																																																																																																																																																																	
<table border="0"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td></tr> </table>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15																																																																																																																																																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15																																																																																																																																																			
By signing below, I certify that the above information is true and accurate:																																																																																																																																																																	
Signature: <u>Cyndi Lee</u>	Date: <u>July 1, 2015</u>																																																																																																																																																																

CONTINUATION PAGE FOR DAILY MEAL COUNT FORM																																																																																																																																																																																					
Site Name: <u>300 Harrod Elem.</u>	Date: <u>July 1, 2015</u>																																																																																																																																																																																				
First Meals Served to Children (cross off number as each child receives a meal):																																																																																																																																																																																					
<table border="0"> <tr><td>181</td><td>182</td><td>183</td><td>184</td><td>185</td><td>186</td><td>187</td><td>188</td><td>189</td><td>190</td></tr> <tr><td>171</td><td>172</td><td>173</td><td>174</td><td>175</td><td>176</td><td>177</td><td>178</td><td>179</td><td>180</td></tr> <tr><td>161</td><td>162</td><td>163</td><td>164</td><td>165</td><td>166</td><td>167</td><td>168</td><td>169</td><td>170</td></tr> <tr><td>151</td><td>152</td><td>153</td><td>154</td><td>155</td><td>156</td><td>157</td><td>158</td><td>159</td><td>160</td></tr> <tr><td>141</td><td>142</td><td>143</td><td>144</td><td>145</td><td>146</td><td>147</td><td>148</td><td>149</td><td>150</td></tr> <tr><td>131</td><td>132</td><td>133</td><td>134</td><td>135</td><td>136</td><td>137</td><td>138</td><td>139</td><td>140</td></tr> <tr><td>121</td><td>122</td><td>123</td><td>124</td><td>125</td><td>126</td><td>127</td><td>128</td><td>129</td><td>130</td></tr> <tr><td>111</td><td>112</td><td>113</td><td>114</td><td>115</td><td>116</td><td>117</td><td>118</td><td>119</td><td>120</td></tr> <tr><td>101</td><td>102</td><td>103</td><td>104</td><td>105</td><td>106</td><td>107</td><td>108</td><td>109</td><td>110</td></tr> <tr><td>91</td><td>92</td><td>93</td><td>94</td><td>95</td><td>96</td><td>97</td><td>98</td><td>99</td><td>100</td></tr> <tr><td>81</td><td>82</td><td>83</td><td>84</td><td>85</td><td>86</td><td>87</td><td>88</td><td>89</td><td>90</td></tr> <tr><td>71</td><td>72</td><td>73</td><td>74</td><td>75</td><td>76</td><td>77</td><td>78</td><td>79</td><td>80</td></tr> <tr><td>61</td><td>62</td><td>63</td><td>64</td><td>65</td><td>66</td><td>67</td><td>68</td><td>69</td><td>70</td></tr> <tr><td>51</td><td>52</td><td>53</td><td>54</td><td>55</td><td>56</td><td>57</td><td>58</td><td>59</td><td>60</td></tr> <tr><td>41</td><td>42</td><td>43</td><td>44</td><td>45</td><td>46</td><td>47</td><td>48</td><td>49</td><td>50</td></tr> <tr><td>31</td><td>32</td><td>33</td><td>34</td><td>35</td><td>36</td><td>37</td><td>38</td><td>39</td><td>40</td></tr> <tr><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td></tr> <tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> </table>		181	182	183	184	185	186	187	188	189	190	171	172	173	174	175	176	177	178	179	180	161	162	163	164	165	166	167	168	169	170	151	152	153	154	155	156	157	158	159	160	141	142	143	144	145	146	147	148	149	150	131	132	133	134	135	136	137	138	139	140	121	122	123	124	125	126	127	128	129	130	111	112	113	114	115	116	117	118	119	120	101	102	103	104	105	106	107	108	109	110	91	92	93	94	95	96	97	98	99	100	81	82	83	84	85	86	87	88	89	90	71	72	73	74	75	76	77	78	79	80	61	62	63	64	65	66	67	68	69	70	51	52	53	54	55	56	57	58	59	60	41	42	43	44	45	46	47	48	49	50	31	32	33	34	35	36	37	38	39	40	21	22	23	24	25	26	27	28	29	30	11	12	13	14	15	16	17	18	19	20
181	182	183	184	185	186	187	188	189	190																																																																																																																																																																												
171	172	173	174	175	176	177	178	179	180																																																																																																																																																																												
161	162	163	164	165	166	167	168	169	170																																																																																																																																																																												
151	152	153	154	155	156	157	158	159	160																																																																																																																																																																												
141	142	143	144	145	146	147	148	149	150																																																																																																																																																																												
131	132	133	134	135	136	137	138	139	140																																																																																																																																																																												
121	122	123	124	125	126	127	128	129	130																																																																																																																																																																												
111	112	113	114	115	116	117	118	119	120																																																																																																																																																																												
101	102	103	104	105	106	107	108	109	110																																																																																																																																																																												
91	92	93	94	95	96	97	98	99	100																																																																																																																																																																												
81	82	83	84	85	86	87	88	89	90																																																																																																																																																																												
71	72	73	74	75	76	77	78	79	80																																																																																																																																																																												
61	62	63	64	65	66	67	68	69	70																																																																																																																																																																												
51	52	53	54	55	56	57	58	59	60																																																																																																																																																																												
41	42	43	44	45	46	47	48	49	50																																																																																																																																																																												
31	32	33	34	35	36	37	38	39	40																																																																																																																																																																												
21	22	23	24	25	26	27	28	29	30																																																																																																																																																																												
11	12	13	14	15	16	17	18	19	20																																																																																																																																																																												
Total First Meals + <u>170</u> [2]																																																																																																																																																																																					
Second meals served to children:																																																																																																																																																																																					
<table border="0"> <tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> </table>		11	12	13	14	15	16	17	18	19	20																																																																																																																																																																										
11	12	13	14	15	16	17	18	19	20																																																																																																																																																																												
Total Second Meals + <u>0</u> [3]																																																																																																																																																																																					
Meals served to Program adults:																																																																																																																																																																																					
<table border="0"> <tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> </table>		11	12	13	14	15	16	17	18	19	20																																																																																																																																																																										
11	12	13	14	15	16	17	18	19	20																																																																																																																																																																												
Total Program Adult Meals + <u>4</u> [4]																																																																																																																																																																																					
Meals served to non-Program adults:																																																																																																																																																																																					
<table border="0"> <tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> </table>		11	12	13	14	15	16	17	18	19	20																																																																																																																																																																										
11	12	13	14	15	16	17	18	19	20																																																																																																																																																																												
Total non-Program Adult Meals + <u>0</u> [5]																																																																																																																																																																																					
TOTAL MEALS SERVED = <u>174</u> [6]																																																																																																																																																																																					
Total damaged/incomplete/other non-reimbursable meals + <u>0</u> [7]																																																																																																																																																																																					
Total leftover meals + <u>36</u> [8]																																																																																																																																																																																					
Total of items: [6] + [7] □+ [8] □= [9] (Item [9] should be equal to item [1] on the front side of the page) <u>210</u>																																																																																																																																																																																					
Number of additional children requesting a meal after all available meals were served:																																																																																																																																																																																					
<table border="0"> <tr><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td></tr> </table>		16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																																																																																																																																																																					
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																																																																																																																																																																							

Weekly Meal Count Consolidation Form

This form is to be completed each day, and is to stay at the site. Sites that serve meals for one week or less do not need to keep a weekly meal count form.

Kentucky Department of Education
School and Community Nutrition
SFSP SITE RECORD OF MEALS SERVED

Site Name: Harrod Elem Site Supervisor: Candi Lee
 Meal Service: ☒ Breakfast ☐ A.M. Snack ☐ Lunch ☐ P.M. Snack ☐ Supper Date: July - August 2015
 Note: A copy of this form must be maintained at the site for the duration of the site's operations.

DATE	DAY	# OF MEALS AVAILABLE*	# OF FIRST MEALS SERVED	# OF SECOND MEALS SERVED	# OF LEFTOVERS
7/1	Monday	210	174	8	36
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				

DATE	DAY	# OF MEALS AVAILABLE*	# OF FIRST MEALS SERVED	# OF SECOND MEALS SERVED	# OF LEFTOVERS
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				

Instructions: Record the number of meals available*, the number of first meals served to children, the number of second meals served to children, and the number of leftovers each day per meal service your site is operating. This number should be copied from your Daily Meal Count Form. **Maintain this form at your site as a record of total meals served.**

* Number of Meals Available includes the number of meals prepared, or delivered, plus left over from previous day if applicable. (Revised from 2010 form)

KYMC01

11/19/10

Daily Meal Count Form for Camp and Upward Bound Sites

- Camp and Upward Bound Sites Must Have Enrollment Roster with names of ALL participants (income eligible and ineligible.)
- Meals for all participants are documented on the enrollment roster each day.
- Although all meals are documented, only meals for eligible participants are only claimed.
- Sponsors must be discrete with the daily meal count form, to ensure that participants eligibility is kept confidential.

Site Name:										Week of:								to								
<u>Instructions:</u>																										
Enter each participant's name in the first column.																										
If the participant is eligible for the SFSP, enter a "X" in the "E" (i.e. eligible) column next to his/her name.																										
If the participant is NOT eligible for the SFSP, enter a "X" in the "I" (i.e. ineligible) column next to his/her name.																										
For each meal that a participant is served, enter a "1" in the appropriate cell for the meal type and day of the week.																										
Name	Breakfast										Lunch								Supper							
	E	I	M	T	W	T	F	S	S	Total	M	T	W	T	F	S	S	Total	M	T	W	T	F	S	S	Total
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								0
										0								0								

I (we) CERTIFY that the above counts were obtained as each meal was served to a child, that each meal counted met all the requirements set forth in the Summer Food Service Program Agreement relating to that meal, and that all other information shown is also true and correct.

Quiz

True or False: Delivery Tickets should be kept with food production facility daily menu records, so show that a sufficient amount of food was prepared each day.

TRUE! Keep both sets of paperwork together as proof of meals prepared, delivered, and appropriately claimed.

Planning the Program

Meal Time Basics

-Field Trips



Field Trips

1. Sites must notify the sponsor of the field trip ahead of time. Open sites need to keep meals on-site for those children not going on the field trip.
2. Sponsors must notify the State Agency about the field trip in CNIPS before the field trip is taken
3. A daily meal count form must be completed when meals are distributed.
4. The meal pattern must be adhered to for meals to be considered reimbursable.

Quiz:

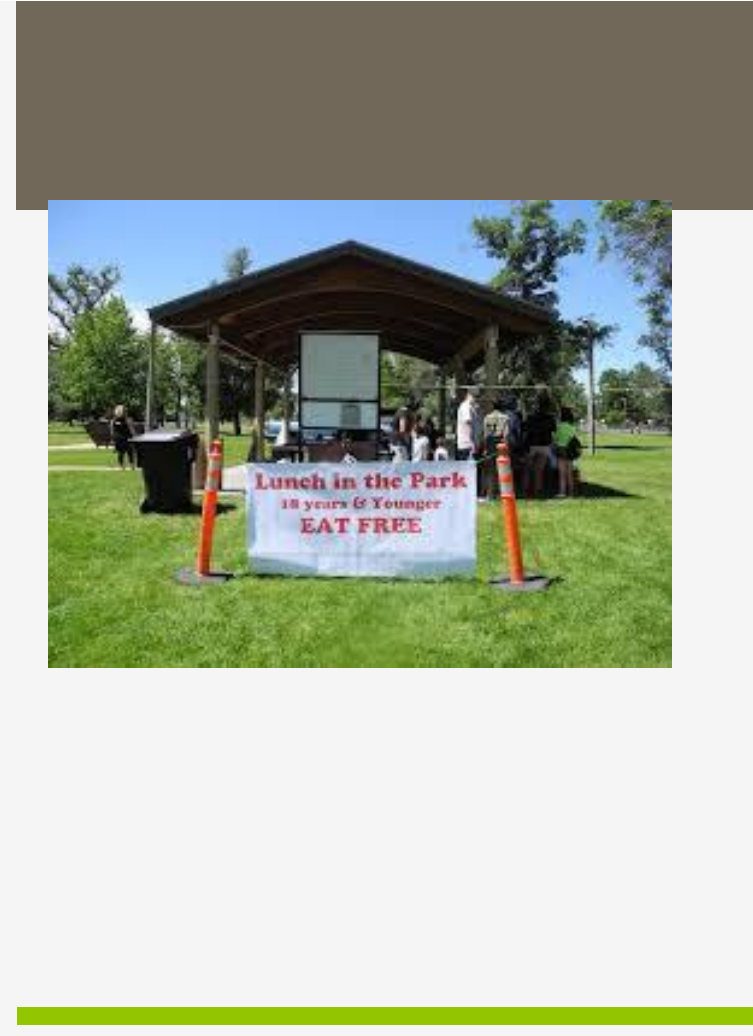
- **True or False:** Field trips must be preapproved by the state agency before they can be taken?

False: The field trip must be noted in CNIPS before the field trip is taken, although it does not have to have official approval by the State Agency. Remember, an open site must stay open if the field trip meals will be claimed for reimbursement.

Planning the Program

Meal Time Basics

-Accommodating
Children with Special
Dietary Needs



Accommodating Children With Special Dietary Needs

A child whose disability restricts his/her diet shall be provided food substitutions only when supported by a statement signed by a licensed medical professional.

The medical statement shall identify:

- the individual's disability and why the disability restricts the child's diet
- the major life activity affected by the disability
- the food or foods to be omitted from the child's diet and
- the food or choice of foods that must be substituted

The Medical Statement is on the SFSP KY webpage. School Food Authorities may use a statement already on file at the school

Revised FY2014-2015

Sponsor and Site Name

Medical Statement for Participants with Special Dietary Needs

This statement must be completed and submitted to the Sponsor listed above before any meal substitutions can be made. The parent/guardian will complete Part 1 and the physician will complete either Part 2 or Part 3. Refer to the information below for clarification. Attach a sheet with additional information if necessary. If changes are needed, the parent/guardian is required to submit a new form signed by the child's physician.

GUIDANCE

Disability:

Under Section 504 of the *Rehabilitation Act of 1973*, and the *Americans with Disabilities Act (ADA)* of 1990, a "person with a disability" means any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment.

Major life activities covered by this definition include caring for one's self, eating, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

USDA regulations **7 CFR Part 15b** require substitutions or modifications in CACFP meals for participants whose disabilities restrict their diets. A participant with a disability must be provided substitutions in foods when that need is supported by a statement signed by a licensed physician. The physician's statement must identify: the child's disability; an explanation of why the disability restricts the child's diet; the major life activity affected by the disability; the food or foods to be omitted from the child's diet, and the food or choice of foods that must be substituted.

Generally, children with food allergies or intolerances do not have a disability as defined under either Section 504 of the Rehabilitation Act or Part B of IDEA, and food service may, but is not required to, make food substitutions for them. However, when in the licensed physician's assessment, food allergies may result in severe, life-threatening (anaphylactic) reactions, the child's condition would meet the definition of "disability," and the substitutions prescribed by the licensed physician must be made.

Special Dietary Needs That Are Not a Disability

Food service providers may make food substitutions, at their discretion, for individual children who do not have a disability, but who are medically certified as having a special medical or dietary need. Such determinations are only made on a case-by-case basis. This provision covers those children who have food intolerances or allergies but do not have life-threatening reactions (anaphylactic reactions) when exposed to the food(s) to which they have problems.

Each special dietary request must be supported by a statement, which explains the food substitution that is requested. It must be signed by a recognized medical authority. The medical statement must include: an identification of the medical or other special dietary condition which restricts the child's diet; the food or foods to be omitted from the child's diet; and the food or choice of foods to be substituted.

Parent/Guardian Request for Fluid Milk Substitution

Parents or guardians may now request in writing that non-dairy beverages be substituted for fluid milk for their children with special dietary needs without providing statement from a recognized medical authority. However, fluid milk substitutions requested are at the option and expense of the facility/center.

The non-dairy beverage provided must be nutritionally equivalent to fluid milk and meet the nutritional standards set by the United States Department of Agriculture (USDA) for Child Nutrition Programs in order for the facility/center to claim reimbursement for the meal through the Child and Adult Care Food Program (CACFP).

A non-dairy beverage product must at a minimum contain the following nutrient levels per cup to qualify as an acceptable milk substitution.

a. Calcium 276 mg	d. Vitamin D 100 IU	g. Potassium 349 mg
b. Protein 8 g	e. Magnesium 24 mg	h. Riboflavin .44 mg
c. Vitamin A 500 IU	f. Phosphorus 222 mg	i. Vitamin B-12 1.1 mcg



Revised FY2014-2015

Part 1. To be completed by a Parent, Guardian, or Authorized Representative

Participant's Name:	Birthday:
Parent/Guardian/Authorized Representative name:	
Home Phone: ()	Work Phone: ()
Address:	
City:	State: Zip:

Part 2. For Participants with a DISABILITY-Licensed Physician must complete

Describe the patient's disability and the major life activities that are affected by the disability:

Foods to be omitted:	Substitutions:

Please list foods and information regarding any needed texture changes (chopped, ground, pureed, etc.):

Please provide any other information regarding the diet:

Part 3. For Participants with special Dietary needs that are NOT A DISABILITY-Recognized Medical Authority must complete

Describe the medical or other special dietary need that restricts the participant's diet:

Foods to be omitted:	Substitutions:

Physician/Medical Authority's Signature

Date

Printed Name and Title


Telephone

*7 CFR 226.20 (h)

Quiz:

True or False: A religious preference or intolerance for a particular food is not considered a medical disability, and as such, should not use the medical disability form to justify the necessity of alternate foods.

True. Sponsors may wish to work with parents to provide alternate foods for religious preferences, however, this is not a requirement in SFSP, only a best practice.



Please contact School and
Community Nutrition if you have
any questions regarding this
online training or any questions
regarding Meal Time Regulations
and Recordkeeping.

502-564-5625